Case SEMDER: COMPLETE THIS SECTIO	N DOCUME COMPLETE THIS SECTION ON DELIVERY Page 1 of
<ul> <li>Complete items 1, 2, and 3. Also colitem 4 if Restricted Delivery is desire</li> <li>Print your name and address on the so that we can return the card to you</li> <li>Attach this card to the back of the mor on the front if space permits.</li> <li>Article Addressed to:</li> <li>Chief of Police Gary V Samson Police Departs</li> <li>13 East Main Street</li> </ul>	Addressee  B. Received by Frinted Name)  C. Date of Delivery  Addressee  B. Received by Frinted Name)  C. Date of Delivery  Addressee  C. Date of Delivery  Address different from item 1?  Yes  If YES, enter delivery address below:
Samson, AL 36477	3. Service Type  Cortified Mail
(Transfer from service label)	7005 0390 0000 5269 0802
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540

102595-02-M-1540

(Transfer from service label) PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540